Preconception and Interconception Care

Governor's Summit on Infant Mortality

Frankfort, Kentucky March 1, 2013 Connie Gayle White, MD, MS, FACOG Deputy Commissioner, Kentucky Department for Public Health



A woman's health is her capital.



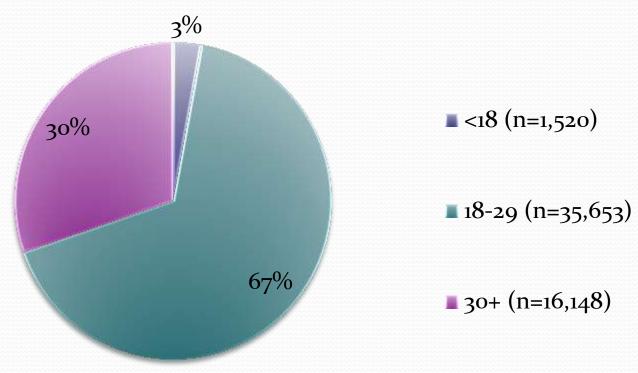
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Harriet Beecher Stowe

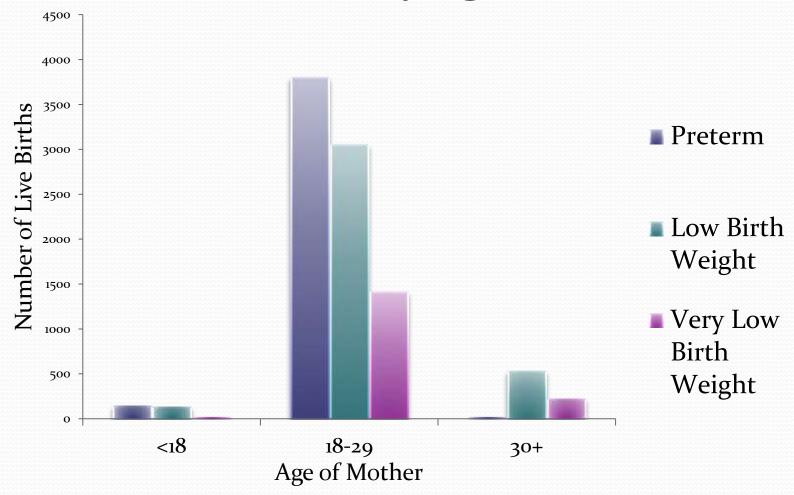


Live Births to Women in Kentucky

Percentage of Live Births in Kentucky by Age of Mother, 2012 (n=53,324)



Poor Birth Outcomes by Age of Mother, 2012



Limited Contraceptive Use: Characteristics of Young Adults

- Tend not to plan ahead or anticipate consequences
- Think they are not at risk
- Feel invulnerable
- Lack confidence or motivation to use
- Embarrassed or not assertive
- Lack power and skill to negotiate use
- Social or cultural expectations or beliefs

Fog Zone

- Magical thinking and ambivalence
 - Of unmarried persons, currently in a sexual relationship, not trying to get pregnant or cause a pregnancy
 - 19% were using NO contraception
 - 24% were using contraception inconsistently
 - Only 50% were well protected

Fog Zone

- Magical thinking and ambivalence
 - 44% thought you should take a 'pill break'
 - 40% that were using the 'rhythm method' didn't know when the woman's most fertile time was
 - 37% think that it is ok to use petroleum jelly with a latex condom

Fog Zone

- Magical thinking and ambivalence
 - 40% though there was a 50% chance of pregnancy during one year of use of birth control pills
 - 15% thought they were infertile
 - 30% thought the government was using the poor and minorities as guinea pigs for new birth control methods
 - 30% thought that birth control was a plot to limit black and other minority populations

- Unintended pregnancies
 - Mistimed
 - Unwanted
- Intended pregnancies

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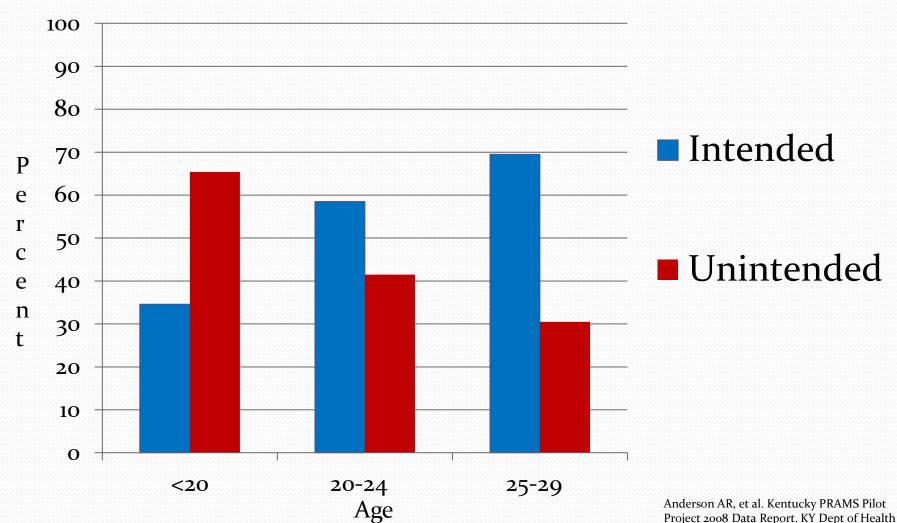
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- Intended pregnancies
 - the right time
 - later than desired
 - indifferent about the pregnancy

Unintendedness in Kentucky

- 59.8% of all pregnancies
- 77.3% of uninsured pregnant patients
- 74% of pregnant Medicaid recipients
- 90.6% of pregnant teens (ages 19 and under)

Reported Intendedness of Pregnancy Among 18-29 year olds in Kentucky



The cost of Unintendedness in KY

- 24,270 Kentucky births were paid by Medicaid
- Each Medicaid birth costs >\$14,000
- •>\$339,780,000 in 2010

Health Consequences of Unintended Pregnancy

- Maternal, Fetal, and Infant Health
 - Limited opportunity for preconception health care
 - Increased risk of physical abuse of pregnant mother
 - Delayed entry into prenatal care (after 1st trimester)
 with mistimed and unw

Health Consequences of Unintended Pregnancy

- Maternal, Fetal, and Infant Health
 - Increased risk of preterm birth (PTB) and low birth weight (LBW)

Health Consequences of Unintended Pregnancy, cont.

- Maternal, Fetal, and Infant Health
 Compared to women with planned pregnancies,
 - Women with unwanted pregnancies were 21% less likely to breastfeed
 - The odds of reporting **postpartum depression** were 1.98 times greater among women with *unwanted* pregnancies and 1.34 times greater among women with *mistimed* pregnancies

Health Consequences of Unintended Pregnancy

- Family Environment
 - Maternal Relationship Instability
 - 46% changed partners in 5 years following pregnancy vs. 21% among women with intended pregnancies
 - Single Parenthood
 - High economic burden
 - Children of single parents are at increased risk of
 - Dropping out of school
 - Teen parenthood
 - Low educational achievement
 - Poverty
 - Divorce as adults

Health Consequences of Unintended Pregnancy

Child Health

Compared to children born of an intended pregnancy, children from unintended pregnancies, and especially unwanted pregnancies, experience:

- Poorer physical and mental health
- Lack of closeness with mother
- Lower cognitive test scores, higher levels of fearfulness and lower levels of positive affect at 2 years old
- Lower verbal test scores in preschool
- Higher level of delinquency during adolescence

Psychological and Social Consequences of Pregnancy for Unmarried Young Adults

- Limited education
- Fewer career or job opportunities
- Heavy economic burden
- Depression, loss of self-confidence and lack of hope
- Consequences more severe for young women than men
- Children of young parents may face psychological, social and economic obstacles

What is Preconception Health?

- Preconception Health (PCH)
 - Health before pregnancy; health throughout a woman's reproductive years

What is Preconception Health? What is Interconception Health?

- Preconception Health (PCH)
 - Health before pregnancy; health throughout a woman's reproductive years
- Interconception Health (ICH)
 - Health between pregnancies

What falls under PCH and ICH?

Healthy Body	Healthy Mind	Healthy Environment
 Folic Acid Nutrition Physical Activity Weight Tobacco Alcohol/Drugs Chronic Conditions Vaccines Medications STIs Oral Health Pregnancy Spacing 	 Mental Health Healthy Relationships Alcohol/Drugs 	 Food Safety Environmental Toxins Workplace Hazardous Materials Home Hazardous Materials Financial Stability Healthy Relationships Healthy Community

Why Should Providers Care About PCH & ICH?

- >40% of all pregnancies in Kentucky are unintended*
 - Unintended pregnancy is highest among young adults
- Poor health status before and during pregnancy affects fetal and infant health, including miscarriage, preterm birth, low birth weight, and birth defects
- Women's wellness matters!

Evidence-Based Components of PCH/ICH for Providers

Evidence-based interventions to improve women's health and reduce poor birth outcomes that can be achieved in a clinic setting include:

- Pregnancy spacing
- Folic acid supplementation
- Tobacco cessation
- Management of chronic conditions
- Promotion of oral health
- STI testing and treatment especially for chlamydia & gonorrhea

Optimal Pregnancy Spacing

- Inter-pregnancy interval of **18-23 months** has lowest risks for:
 - Preterm birth
 - Low birth weight
 - Small for gestational age

Optimal Pregnancy Spacing

- Less than 6 months between pregnancies
 - 40 % increased risk of preterm birth
 - 61 % increased risk of low birth weight
 - 26 % increased risk of being small for their gestational age

What can Providers Do?

- Reproductive Life Planning
- Contraceptive Counseling
- Method matching short vs. long acting methods, such as Long Acting Reversible Contraceptives (LARCs)

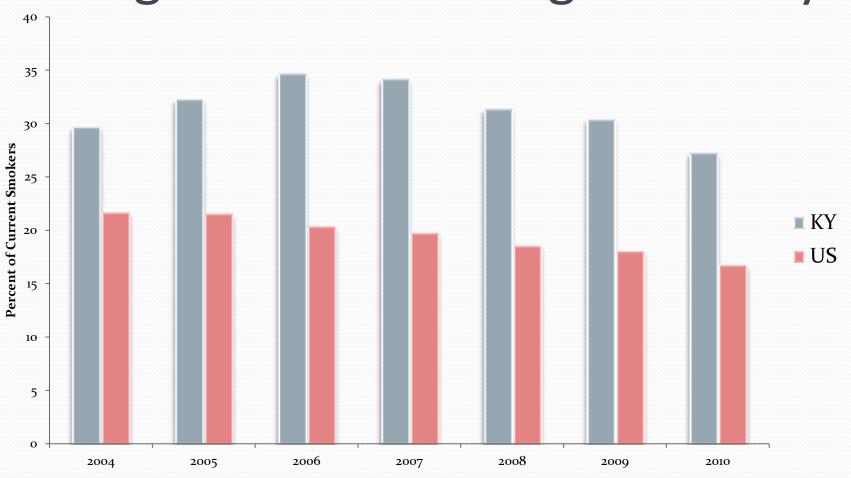
Smoking Prevalence Among Women

- Nationally, the median prevalence of current smoking among women of reproductive age (18-44yrs) was **16.8**% in **2010**
 - Kentucky's prevalence was the highest in the US at 27.3%

Smoking Prevalence Among Women

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 - Kentucky's prevalence was the highest in the US at 27.3%
- In 2008, approximately 13% of women reported smoking during the last three months of pregnancy, nationally
 - In Kentucky in 2012, 27.1% of babies were born to women who reported smoking on the birth certificate#
 - Rates ranged from a low of 16 percent in Fayette County to more than 51 and 53 percent of births in Lee and Elliot counties, respectively.

Smoking Rates women ages 18-44 yrs



Maternal Tobacco Use During Pregnancy & Early Childhood

- Maternal Harm:
 - Premature rupture of the membranes
 - Placenta previa
 - Placental abruption
 - Ectopic pregnancy
 - Spontaneous abortion
 - Preterm delivery

- Fetal/Infant Harm:
 - Small for gestational age
 - Low birth weight
 - Stillbirth
 - Sudden Infant Death Syndrome (SIDS)
- Infant/Child Harm:
 - Otitis Media
 - New & exacerbated cases of asthma
 - Lower respiratory infections

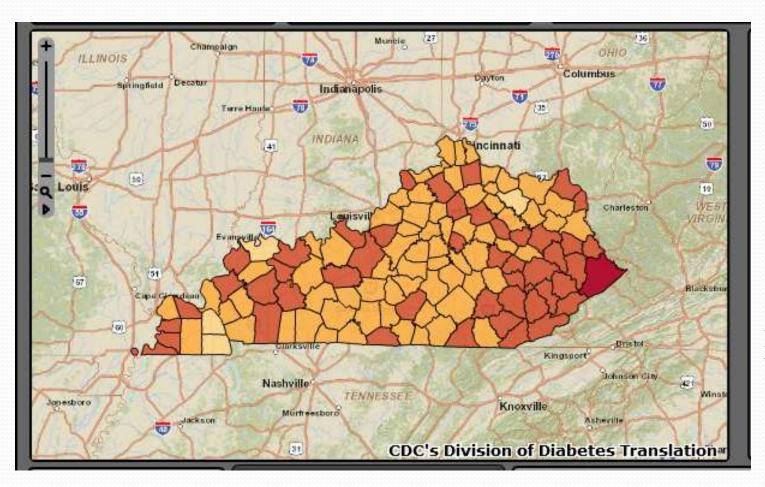
EVERYONE HAS THE RIGHT TO BREATHE

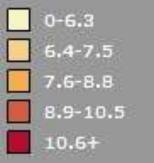


Diabetes in Kentucky pregnancies

- New diabetes cases in Kentucky have increased 27%
 in 5 years from 2004 to 2009
 - Rates have increased from 8.7 per 1,000 in 2004 to 11.1 per 1,000 in 2009
 - 5.2% of pregnant women in Kentucky report gestational diabetes or pre-existing diabetes
 - 449 births to pre-existing diabetics
 - 2,772 births to women who developed diabetes with pregnancy

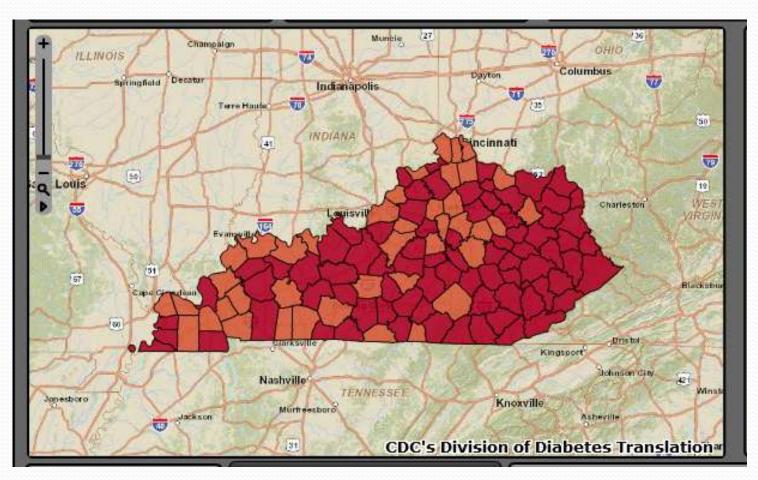
Diabetes in Kentucky 2004





Kentucky = 8.7US = 6.9

Diabetes in Kentucky 2009





Kentucky = 11.1 US = 7.9

Reproductive Health Risks of Uncontrolled Chronic Conditions

Diabetes

- 3-fold increase in prevalence of birth defects among infants of women with type 1 and type 2 diabetes
- Prevalence is substantially reduced through proper management of diabetes

Hypertension in Kentucky pregnancies

- Over 1/3 of adults in Kentucky report having hypertension
 - ¼ of pregnant women report having hypertension

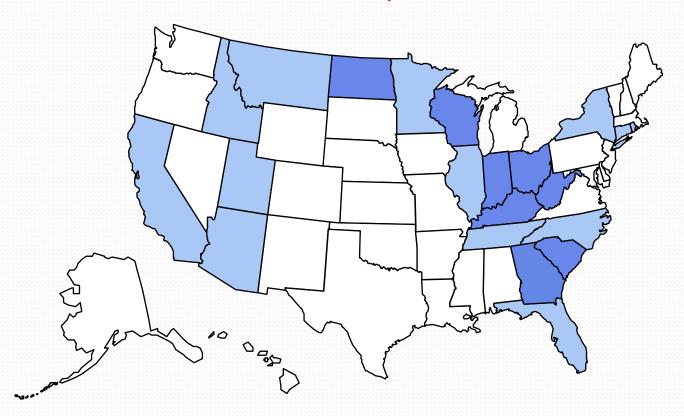
Reproductive Health Risks of Uncontrolled Chronic Conditions

Hypertension

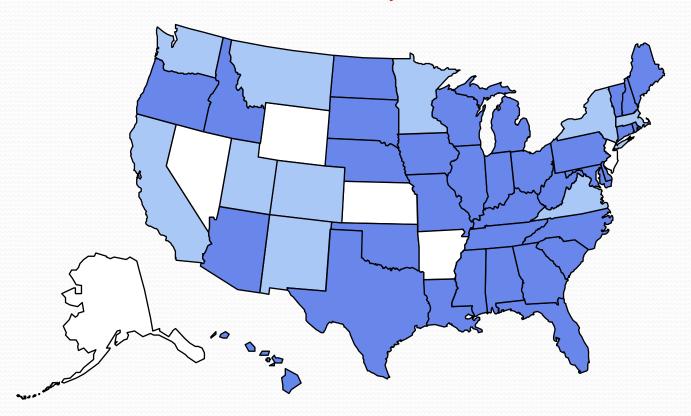
- Maternal mortality
- 2-fold increase in gestational diabetes
- <u>Fetal complications</u>: Preterm birth, placental abruption, Intrauterine growth restriction (IUGR), fetal death

Obesity in Kentucky pregnancies

- Obesity
 - 30% of women ages 18-44 were obese compared to 24% nationally

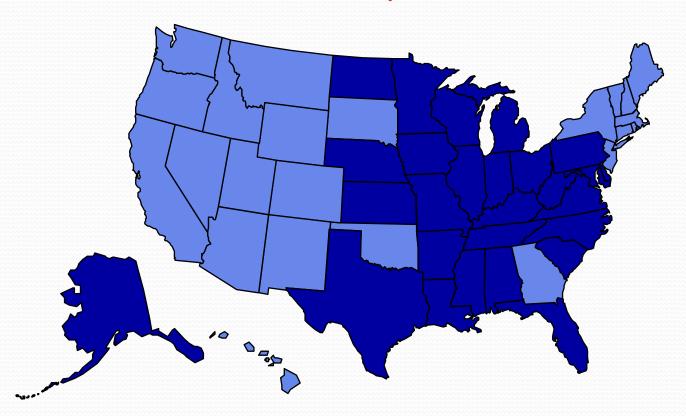


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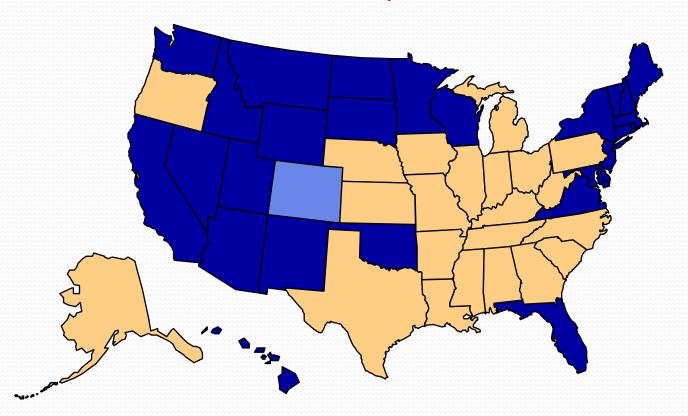


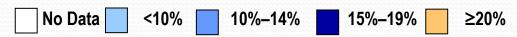
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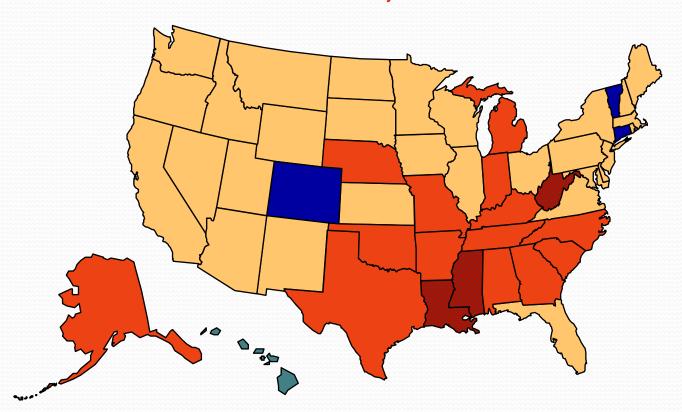


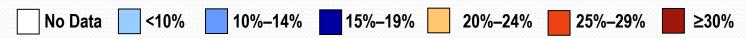


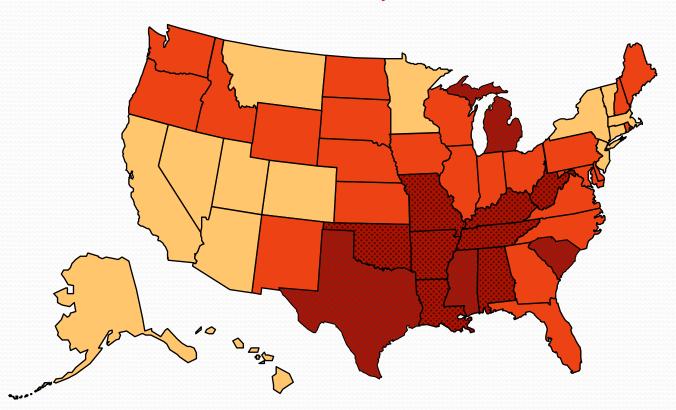


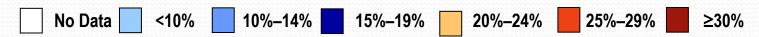














Reproductive Health Risks of Uncontrolled Chronic Conditions

Obesity

- Increases the likelihood of having hypertension and diabetes
- Increases the risk of reproductive complications including:
 - Neural Tube Defects (NTDs)
 - Preterm birth
 - Pregnancy-induced hypertension
 - Gestational diabetes
 - Cesarean section

Periodontal Disease Affects Women's and Children's Health

- Increasing evidence of links between oral health and women and children's health
- Direct links between a maternal oral health and their children's risk for dental caries

Maternal & Child Health
Preterm birth
Small for gestational age
Preeclampsia
Gestational diabetes
Fetal loss
Child dental caries
Child dental caries

Unintended pregnancy and cost

• The cost savings to prevent unintended pregnancy were so great that the Affordable Care Act provided the opportunity for states to add a family planning expansion through a Center for Medicaid Services (CMS) state plan amendment (SPA)

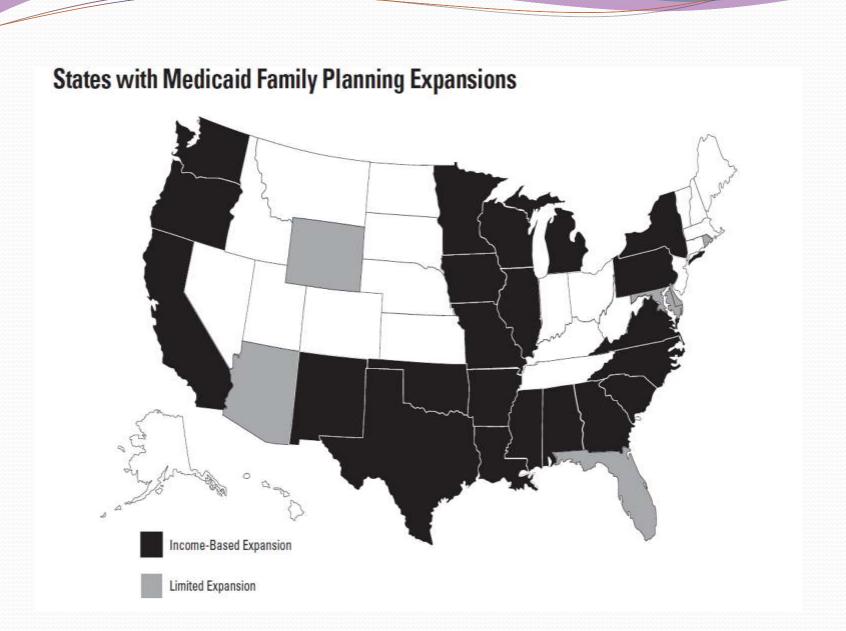
Family Planning State Plan Amendment (SPA)

Benefits of SPA for expansion of family planning expansion in Kentucky includes:

- Reduction in unintended pregnancies
- Decrease in teen pregnancy
- Decrease in publicly funded births
- Improved birth spacing/intervals
- Delay of first pregnancy

More SPA Benefits

- Decrease pregnancy termination by half
- Increased access to long-acting, highly-effective contraceptive methods
- Preconception assessment to plan for a healthy pregnancy and birth
- Enhanced access to preventive health services and healthy life style choices
- Significant savings in federal, state and local dollars



Potential for Savings

Expansion for family planning services qualifies for the special CMS incentive rate of

90% federal with a 10% state match

One year in Kentucky after SPA

Participants58,000

Unintended pregnancies averted 8,370

Unintended Medicaid pregnancies averted 4,350

Total savings for Medicaid \$62,900,000

Total cost of the program \$18,893,000

Total Net Savings \$44,007,000

One year in Kentucky after SPA

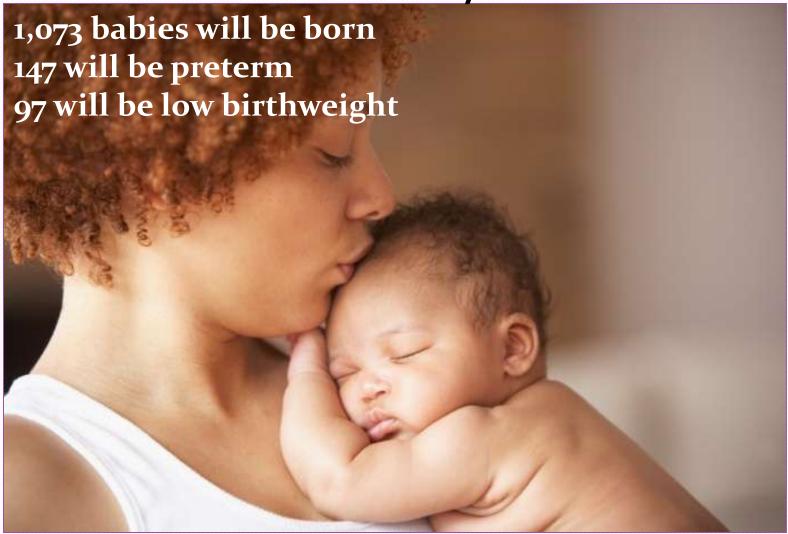
 Participants 	58,90
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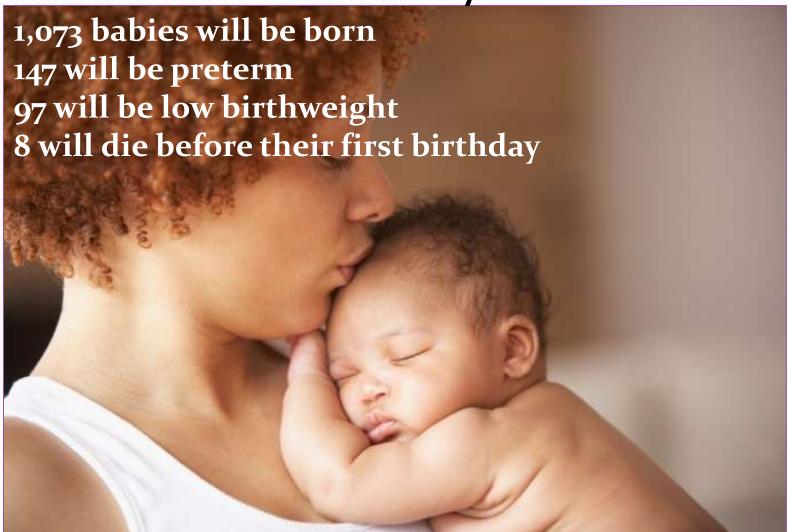
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- **Kentucky** savings for Medicaid \$19,008,000
- **Kentucky** costs of the program \$ 2,638,000
- Kentucky net savings \$16,370,000











www.EveryWomanSoutheast.org

every woman southeast

Contact Us

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state partners

initiatives

resources

policy & advocacy



The Every Woman Southeast Initiative is a group of leaders and agencies from eight states working together to build a multi-state. multi-layered partnership to improve the heath of women and infants in the south.

updates 10 10 2010 We're Live!

partner focus









new resources

Call to Action

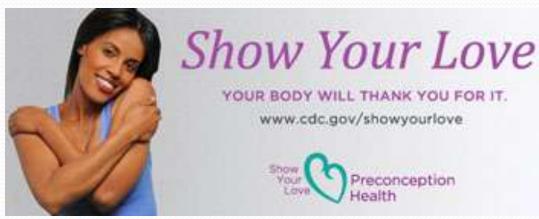
- Tired of always being the "worst" states in the nation.
- Decided that we can no longer ignore our legacy of health inequities.
- Recognized that to get different results we needed to change the way we approach this work.
- Strong interest in connecting with each other across states.
- Desire to give voice to "grass tip" leadership.



Before, Between & Beyond Pregnancy







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Harriet Beecher Stowe

